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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number

10/698464

Filing Date

11/03/2003

Applicant(s)

Bergmann / Krappe

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	X					
2		1				
3		1				
4	X					
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15			X			
16			X			
17			X			
18				3		
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Total Indep						
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Total Indep						
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Total Claims						

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